WEMMH PTO/SB/22 (7/05)

Approved for use through 7/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to a collection of information unless it contains a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Optional)	
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			7359-6	
Application Number 10/051,566		Filed January 18, 2002		
For THERMOFORMED CONTAINER WTIH INWARDLY EXTENDING CUT LIP				
Art Unit	1732		, , , , , , , , , , , , , , , , , , , ,	dmund Lee
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): Fee Small Entity Fee				
One month [3	37 CFR 1.17(a)(1)]	\$120	\$60	\$
☐ Two months [37 CFR 1.17(a)(2)]		\$450	\$225	\$
∑ Three months [37 CFR 1.17(a)(3)]		\$1020	\$510	\$ <u>510.00</u>
☐ Four months	[37 CFR 1.17(a)(4)]	\$1590	\$795	\$
☐ Five months	[37 CFR 1.17(a)(5)]	\$2160	\$1080	\$
A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 23-3030. I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the Applicant/inventor. Assignee of record of the entire interest. See 37 CFR 3.171. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). Attorney or agent of record. Registration Number: 28,309 Attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a): Signature Thomas Q. Henry Typed or Printed Name Telephone Number				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.				
★Total of 1 forms are submitted.				